## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
JAME OF COMMITTEE (In Full)	<u> </u>
Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼
	C C00489799
Check if 24-hour report  48-hour report  New report  Amends report filed	I on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Work for Progress	M - M / D - D / Y - Y - Y
Mailing Address 1543 Wazee Street, 4th Floor	09 22 2014 Amount
City State Zip Code	56022.00
Denver CO 80202	Transaction ID: B532993 Date of Disbursement or Obligation
Purpose of Expenditure Distribution of canvass literature  Category/ Type 004	09 / 22 / 2014
Name of Federal Candidate Support Offic	e Sought: House District:
Mark Udall Oppose	President Senate State: CO
	ursement For: Primary X General
Per Election for Office Sought 182374.56 2014	Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Work for Progress	09 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1543 Wazee Street, 4th Floor	Amount
	Alloun
City State Zip Code	56022.00
Denver CO 80202	Transaction ID : B532994  Date of Disbursement or Obligation
Purpose of Expenditure Distribution of canvass literature  Category/ 004	09 / 22 / 2014
Type Type	09 22 2014
Name of Federal Candidate Support Office	e Sought: House District:
Cory Gardner Oppose	President Senate State: CO
2017	ursement For: Primary X General
Per Election for Office Sought 182374.56 2014	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	112044.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(4)	7 7 7
(c) TOTAL Independent Expenditures	
· ·	7-1-7-1-7-1-7-1-7-1-7-1-7-1-7-1-7-1-7-1
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
Aletheia Henry  [Electronically Filed] Date	09 24 2014
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	1120	PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes		C C00489799
Check if 24-hour report X 48-hour report New report	Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee Planned Parenthood Action Fund Inc.		Date of Public Distribution/Dissemination
Mailing Address 434 West 33rd Street		09 16 2014 Amount
City State Zip	Code 01	163.38 Transaction ID : B532999
Purpose of Expenditure List rental	tegory/ Type 004	Date of Disbursement or Obligation  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate  Kay Hagan		Sought: House District:
Calendar Year-To-Date		President Senate State: NC  ursement For: Primary General
Per Election for Office Sought 94033 Full Name of Payee	2014	Other (specify) ▶  Date of Public Distribution/Dissemination
Planned Parenthood Action Fund Inc.		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 434 West 33rd Street		Amount
City State Zip New York NY 100	Code 001	Transaction ID : B532997 Date of Disbursement or Obligation
Purpose of Expenditure Social media outreach tool	tegory/ Type 004	09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Thom Tillis	Support Office	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		ursement For: Primary X General
(a) SUBTOTAL of Itemized Independent Expenditures		2066.16
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures repo with, or at the request or suggestion of, any candidate or authorized com- party committee) any political party committee or its agent.		
Aletheia Henry [Electronically Signature	Filed] Date 0	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
	0
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee Planned Parenthood Action Fund Inc.	Date of Public Distribution/Dissemination
	09 / 16 / 2014
Mailing Address 434 West 33rd Street	Amount
City State Zip Code	162.37
New York NY 10001	Transaction ID : B532998 Date of Disbursement or Obligation
Purpose of Expenditure List rental  Category/ Type  004	09 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
Thom Tillis Oppose	President State: NC State:
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	ursement For: Primary ⊠ General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Community Outreach Group LLC	09 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 Vermont Ave N.W. #300	Amount
City State Zip Code	13964.79
Washington DC 20005	Transaction ID : B533001 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing - Persuasion & GOTV  Category/ Type  O04	09 / 24 / 2014
Name of Federal Candidate Support Office	e Sought: House District:
Thom Tillis Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought  Disb 2014	ursement For: Primary X General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	14127.16
(a) SOBTOTAL OF TERMIZED INDEPENDENT EXPENDITURES	14121.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mount with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
	9 24 2014
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
Check if 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y = Y
	Date of Public Distribution/Dissemination
Community Outreach Group LLC	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 Vermont Ave N.W. #300	mount
City State Zip Code	13964.79
· · · · · · · · · · · · · · · · · · ·	ransaction ID: B533000 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing - Persuasion & GOTV  Category/ Type  004	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office So	ought: House District:
Koy Hogon	resident Senate State: NC
Calendar Year-To-Date Per Election for Office Sought  Disburse 2014	ement For: Primary ⊠ General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure  Category/ Type	M = M / D = D / Y = Y = Y = Y
Name of Federal Candidate Support Office S	ought: House District:
Oppose Pr	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	ement For: Primary General
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	13964.79
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	142202.11
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, o party committee) any political party committee or its agent.	
Aletheia Henry  [Electronically Filed] Date 09	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	